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## **STATEMENT OF**

FEC FORM 1	ORGANIZATION				Office Use Only				
NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example:If typ over the lines.		12FE4M				
MOTOR AN	D EQUI	PMENT MANU	FACTURERS	ASSOC		I PAC (	MEMA	PAC)	
ADDRESS (number and street)		PO BOX 65853							
(Check if address is changed)		WASHINGTON		<u> </u>	DC	20035	-		
			CITY		STATE		ZIP CODE		
COMMITTEE'S E-MAIL ADDRES  (Check if address is changed)		SS (Please provide only or satterfield.david@arent							
COMMITTEE'S WEB	PAGE ADD	DRESS (URL)						1	
(Check if is change									
2. DATE 10	0 21	2011							
3. FEC IDENTIFIC	CATION NU	IMBER C	C00479964						
4. IS THIS STATE	MENT X	NEW (N) OR	AMEI	NDED (A)					
I certify that I have of	examined th	is Statement and to the	best of my knowledge	and belief it	is true, corre	ect and com	plete.		
Type or Print Name	of Treasurer	Mr. Craig Engle							
Signature of Treasure	<i>Mr. Cra</i> er	ig Engle	[Electroni	cally Filed]	Date	0 2	1 Y	2011	
NOTE: Submission of		ous, or incomplete informa					ties of 2 U.S	S.C. §437g.	
Office Use			Federal Ele	r information co ection Commissio 00-424-9530			FORN		